

AD 400 (Rev. 05/00) Summons in a Civil Action

UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF ILLINOIS

SUMMONS IN A CIVIL CASE

GERALD A. BERRY,

Plaintiff,

V.

JOHN E. POTTER, POSTMASTER GENERAL, UNITED STATES  
POSTAL SERVICE; AMERICAN POSTAL WORKERS UNION;  
AMERICAN POSTAL WORKERS UNION LOCAL 7011,

Defendants.

CASE,

07CV6282

ASSIG

JUDGE DER-YEGHAIYAN

DESK

MAG. JUDGE NOLAN

MAG.

TO: (Name and address of Defendant)

United States Postal Service  
John E. Potter  
475 L'Enfant Plaza SW  
Washington, DC 20260

YOU ARE HEREBY SUMMONED and required to serve upon PLAINTIFF'S ATTORNEY (name and address)

Michael T. Smith  
440 W. Irving Park Road  
Roselle, Illinois 60172  
847-895-0626

an answer to the complaint which is herewith served upon you, within 60 days after service of this summons upon you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. You must also file your answer with the Clerk of this Court within a reasonable period of time after service.

MICHAEL W. DOBBINS, CLERK

NOV 06 2007

DEPUTY CLERK

DATE

U.S. Postal Service  
**CERTIFIED MAIL - RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Provided)  
 For Delivery Information visit our website at: www.usps.com

**OFFICIAL USE**

Postage	\$ 60.58
Certified Fee	\$2.50
Return Receipt Fee (Endorsement Required)	\$2.15
Restricted Delivery Fee (Endorsement Required)	\$0.00
<b>Total Postage &amp; Fees</b>	<b>\$ 65.23</b>

12/04/2007

Post To: *John E. Potter / US Postal Service*  
 Street, Apt. No.,  
 or PO Box No. *475 L'Enfant Plaza SW*  
 City, State, ZIP+4® *Washington DC 20260*

**SENDER: COMPLETE IN THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

**John E. Potter**  
**United States Postal Service**  
**475 L'Enfant Plaza SW**  
**Washington DC 20260**

2. Article Number  
 (Transfer from service label)

7003 0500 0005 5895 7376

**COMPLETE DELIVERY INFORMATION**

A. Signature

*X. J. [Signature]*

☒ Agent

☐ Addressee

B. Received by (Printed Name)

*OPMG*

C. Date of Delivery

*12-6-07*

D. Is delivery address different from item 1? ☐ Yes  
 If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (See Post)

☐ Yes